Second Written Testimony for the Public Health Committee on Bill 5298, An Act Concerning Involuntary Shock Therapy

I watched some of the videotaped testimony that occurred in the hearing on Bill 5298 after I left today, February 20. I have some commentary.

One of the committee members addressed Harold Schwartz on the phrase "electroconvulsive therapy." He was thankful to Schwartz for using the correct scientific phrase. I want to let the committee know that the reason opponents of electroshock prefer not to use the phrase "electroconvulsive therapy" is because many of us feel that the phrase is a medical euphemism for a treatment that isn't necessarily therapeutic. In my case especially, I strongly prefer to call the treatment electroshock. Our phrasing has nothing to do with ignorance.

Harold Schwartz also made a statement about there being no rigorous scientific studies showing ECT causes long—term memory loss. I feel that his statement is false.

In my Examiner.com articles dated November 21, 2012 and February 4, 2013, I summarized studies showing memory and cognitive dysfunction in electroshocked patients, some of it longer than six months after the treatment. Let me cite the sources for you below. I use my own citation style, which I find more accessible than the dominant citation style of the American Psychological Association. My style still lists all necessary identifying information.

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Author: Glenda MacQueen, Caroline Parkin, Michael Marriott, Helen Bégin, Gary Hasey. Article: The long—term impact of treatment with electroconvulsive therapy on discrete memory systems in patients with bipolar disorder. Periodical: Journal of Psychiatry & Neuroscience. Volume: 32. Issue: 4. Date: July 2007. Pages: 241–249. Web address: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1911194/.

Author: Harold A Sackeim, Joan Prudic, Rice Fuller, John Keilp, Philip W Lavori, Mark Olfson. Article: The Cognitive Effects of Electroconvulsive Therapy in Community Settings. Periodical: Neuropsychopharmacology. Volume: 32. Issue: 1. Date: January 2007. Pages: 244–254. Date of access: November 21, 2012. Web address: http://www.nature.com/npp/journal/v32/n1/full/1301180a.html.

Author: Miriam Feliu; Christopher L. Edwards; Shiv Sudhakar; Camela McDougald; Renee Raynor; Stephanie Johnson; Goldie Byrd; Keith Whitfield; Charles Jonassaint; Heather Romero; Lekisha Edwards; Chante Wellington; LaBarron K. Hill; James Sollers, III; Patrick E. Logue. Article: Neuropsychological effects and attitudes in patients following electroconvulsive therapy. Periodical: Neuropsychiatric Disease and Treatment. Volume: 4. Issue: 3. Date: 2008. Pages: 613–617. Web address: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2526376/.

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Another point in the hearing was the claim that ECT has a high rate of efficacy. In my article of February 4, I cited three studies giving evidence against that claim. Furthermore, an issue, of patients possibly exaggerating the therapeutic effect of the treatment in order to escape the experience of it as torture, was not even discussed. In my first emailed testimony, I mentioned how I was forced to lie about my feelings in order to get the process to stop. My article of January 14 goes into more detail about why that happened.

I also want to address the claim that electroshock is the only last resort for patients in dire circumstances. I feel that this claim is unimaginative. Non–drug treatment alternatives include transcranial magnetic stimulation and the Fisher Wallace Stimulator. Information about those treatments is at http://neurostar.com/nondrug-treatment-for-depression/ and http://www.fisherwallace.com/. The Fisher Wallace Stimulator apparently is a less invasive treatment that is said to work by mechanisms similar to "electroconvulsive therapy." Yet another proposed alternative is nitrous oxide. I cite an article about it below.

Author: Brian Milne. Article: Nitrous oxide (laughing gas) inhalation as an alternative to electroconvulsive therapy. Periodical: Medical Hypotheses. Volume: 74. Issue: 5. Date: May 2010. Pages: 780–781. Web address: http://www.ncbi.nlm.nih.gov/pubmed/20006916.

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